

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

101578596

FILING DATE

APPLICANT(S)

CLAIMS

| | AS FILED | | AFTER 1 st AMENDMENT | | AFTER 2 nd AMENDMENT | |
|--------------|----------|------|------------------------------------|------|------------------------------------|------|
| | IND. | DEP. | IND. | DEP. | IND. | DEP. |
| 1 | 1 | | | | | |
| 2 | | 1 | | | | |
| 3 | | 2 | | | | |
| 4 | | 0 | | | | |
| 5 | | 0 | | | | |
| 6 | | 0 | | | | |
| 7 | | 0 | | | | |
| 8 | | 0 | | | | |
| 9 | | 0 | | | | |
| 10 | | 0 | | | | |
| 11 | | 0 | | | | |
| 12 | | 0 | | | | |
| 13 | | 0 | | | | |
| 14 | | 0 | | | | |
| 15 | | 0 | | | | |
| 16 | | 0 | | | | |
| 17 | | 0 | | | | |
| 18 | | 0 | | | | |
| 19 | | 0 | | | | |
| 20 | | 0 | | | | |
| 21 | | 0 | | | | |
| 22 | | 0 | | | | |
| 23 | | 0 | | | | |
| 24 | 1 | | | | | |
| 25 | | 0 | | | | |
| 26 | | 0 | | | | |
| 27 | | 0 | | | | |
| 28 | | 0 | | | | |
| 29 | | 0 | | | | |
| 30 | | 2 | | | | |
| 31 | 1 | | | | | |
| 32 | | 1 | | | | |
| 33 | | 2 | | | | |
| 34 | | 0 | | | | |
| 35 | | 0 | | | | |
| 36 | | 0 | | | | |
| 37 | | 0 | | | | |
| 38 | | 0 | | | | |
| 39 | | 0 | | | | |
| 40 | | 0 | | | | |
| 41 | | 0 | | | | |
| 42 | | 0 | | | | |
| 43 | | 0 | | | | |
| 44 | | 0 | | | | |
| 45 | | 0 | | | | |
| 46 | | 0 | | | | |
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| 48 | | 0 | | | | |
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| 50 | | 0 | | | | |
| TOTAL IND. | | ↓ | | ↓ | | ↓ |
| TOTAL DEP. | | ← | | ← | | ← |
| TOTAL CLAIMS | | | | | | |

| | AS FILED | | AFTER 1 st AMENDMENT | | AFTER 2 nd AMENDMENT | |
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| | IND. | DEP. | IND. | DEP. | IND. | DEP. |
| 51 | | 0 | | | | |
| 52 | | | 1 | | | |
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| 83 | | | 1 | | | |
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| TOTAL IND. | | ↓ | | ↓ | | ↓ |
| TOTAL DEP. | | ← | | ← | | ← |
| TOTAL CLAIMS | | | | | | |

| MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875) | | | | | | | SERIAL NO. 10/578596 | | FILING DATE | | | | |
|--|----------|------|------------------------------------|------|------------------------------------|------|-------------------------|----------|-------------|------------------------------------|------|------------------------------------|------|
| | | | | | | | APPLICANT(S) | | | | | | |
| CLAIMS | | | | | | | | | | | | | |
| | AS FILED | | AFTER 1 st AMENDMENT | | AFTER 2 nd AMENDMENT | | | AS FILED | | AFTER 1 st AMENDMENT | | AFTER 2 nd AMENDMENT | |
| | IND. | DEP. | IND. | DEP. | IND. | DEP. | | IND. | DEP. | IND. | DEP. | IND. | DEP. |
| 101 | | | | | | | 151 | | | | 1 | | |
| 102 | | | | | | | 152 | | | | 1 | | |
| 103 | | | | | | | 153 | | | | 1 | | |
| 104 | | | | | | | 154 | | | | | | |
| 105 | | | | | | | 155 | | | | | | |
| 106 | | | | | | | 156 | | | | | | |
| 107 | | | | | | | 157 | | | | | | |
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| 110 | | | | | | | 160 | | | | | | |
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| 123 | | | | | | | 173 | | | | | | |
| 124 | | | | | | | 174 | | | | | | |
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| 145 | | | | | | | 195 | | | | | | |
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| 148 | | | | | | | 198 | | | | | | |
| 149 | | | | | | | 199 | | | | | | |
| 150 | | | | | | | 200 | | | | | | |
| TOTAL IND. | | ↓ | | ↓ | | ↓ | TOTAL IND. | | ↓ | 2 | ↓ | | ↓ |
| TOTAL DEP. | | ← | | ← | | ← | TOTAL DEP. | | ← | 50 | ← | | ← |
| TOTAL CLAIMS | | | | | | | TOTAL CLAIMS | | | 52 | | | |